PTO/SB/30 (10-01)
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## REQUEST FOR **CONTINUED EXAMINATION (RCE) TRANSMITTAL**

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collection of information unless it displays a valid ONB control number		
Application Number	10/611,392	
Filing Date	06/30/2003	
First Named Inventor	Xiang	
Art Unit	2416	
Examiner Name	Patel	
Attorney Docket Number Client Ref.	2416 15606BAUS01U	

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

Submission rec	quired under 37 CFR 1.114			
a. Previously submitted				
i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on [DATE].  (Any unentered amendment(s) referred to above will be entered).  iii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on				
b. X Enclosed				
i. X Amendment/Reply iii. Information Disclosure Statement (IDS)				
ii. Affidavit(s)/Declaration(s) iv. Other				
2. Miscellaneous				
a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period ofmonths. (Period of suspension shall not exceed 3 months: Fee under 37 CFR 1.17(i) required)  b. Other				
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.				
The Director is hereby authorized to charge the following fees, or credit any overpayments, to     Deposit Account No. 141315				
i. x RCE fee required under 37 CFR 1.17(e)				
ii. X Extension of time fee (37 CFR 1.136 and 1.17)				
iii. Other				
b. Check in the amount of \$ enclosed				
c. Payment by credit card (Form PTO-2038 enclosed)				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
& A	SIGNATURE OF APPLICANT, ATTORNEY, OF	R AGEN	REQUIRED	
Name (Print/Type)	Holmes W. Anderson	Registra	tion No. (Attorney/Agent) 37272	
Signature	/Holmes W. Anderson/	Date	March 9, 2009	
CERTIFICATE OF MAILING OR TRANSMISSION				
Thereby certify that this correspondence is being electronically filed with the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below				
Name (Print/Type)	Christine M. Morrissette			
Signature	/Christine M. Morrissette/	Date	March 9, 2009	
Burden Hour Statement: Thi amount of time you are requi NOT SEND FEES OR COMP	s form is estimated to take 0.2 hours to complete. Time will vary dependinged to complete this form should be sent to the Chief Information Officer, ULETED FORMS TO THIS ADDRESS. SEND Fees and Completed Form	g upon the n S. Patent a s to the follo	eeds of the individual case. Any comments on the nd Trademark Office, Washington, DC 20231. DO wing address: Assistant Commissioner for Patents, Box	